

1001 I Street Sacramento, Ca 95814-2815 (916) 322-7061

Mail To:

Enforcement Division Heavy-Duty Diesel Enforcement Section – Southern Division

P.O. Box 160 Rosemead, CA 91770-0160 (626) 450-6161

Heavy-Duty Vehicle Inspection Program Demonstration of Correction Form

Directions: Please complete this form regarding repairs made to your engine. The repair receipt(s) and/or work order should include a list of the component(s) replaced, including a description of the part(s), the part number(s) and cost, and the repair(s) and/or adjustment(s) made to your engine. (See Section 2186. Title 13. California Code of Regulations listed on the back of your citation.)

Citation #: License #: Repair Facility: Address: City:	Lice				
Zip:	State: Phone:				
Facility Type (Please Circle One):	Owner	Dealer	Fleet	Independent	
Name of Mechanic:		Repair Da	te:		
(Please use the following Air Filter: Governor: Turbo: Blower: Overhead/Rack: Fuel Filter: Throttle Delay: Fuel Injection Pump: Fuel Injection Timing: Fuel Injectors: AFRC/Puff Limiter: EGR: Computer Controls:	Positive Crankcas Thermostatic Air (Air Injection Syste Evaporative Contr Spark Controls: Carburetor: Fuel Injection: Early Fuel Evapor Catalyst: Fill Pipe Restricto EGR: Computer Control Other:	e Vent: Cleaner: em: ols: ation: s:	Part Cos Labor Co Total Co Downtim Post-Rep	osts:sts:sts:sts:sts:sts:%	
Thermostat: Other: Please return this form along with a			*Please ir smokeme	nclude a copy of the ter test results.	

repair receipts and/or work order, to the address shown above.

PLEASE MAKE SURE...

The engine identification label is in place, is accurate, and is accessible,

The engine governor is set to appropriate specifications,

The anti-tampering wire seals are in place,

The engine is set to manufacturer's specifications.

My engine is now in good mechanical repair and does not emit excessive smoke.

Please Sign and Date	